## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼			
House Majority PAC	C C00495028		
	V		
Check if 24-hour report X 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y		
Full Name of Payee Mack-Sumner Communications, LLC	Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 2001 N Beauregard St			
Ste 420	Amount		
City State Zip Code	9821.66		
Alexandria VA 22311-1750	Transaction ID : VN7GD9QVBA3  Date of Disbursement or Obligation		
Purpose of Expenditure Direct Mail - Estimate  Category/ Type	M = M / D = D / Y = Y = Y		
Name of Federal Candidate Support Office	Sought:   House District: 13		
David W. Jolly Oppose	President Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought  Disbut 2014	rrsement For: Primary General  Other (specify) ► Special General		
Full Name of Payee	Date of Public Distribution/Dissemination		
Mack-Sumner Communications, LLC	02 14 2014		
Mailing Address 2001 N Beauregard St			
Ste 420	Amount		
City State Zip Code	13306.20		
Alexandria VA 22311-1750	Transaction ID: VN7GD9QVBC9 Date of Disbursement or Obligation		
Purpose of Expenditure Direct Mail - Estimate  Category/ Type	M = M / D = D / Y = Y = Y		
Name of Federal Candidate Support Office	e Sought: X House District: 13		
David W. Jolly Oppose	President Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought  Disbut 2014	rrsement For:  Primary  General  Other (specify) ► Special General		
(a) SUBTOTAL of Itemized Independent Expenditures	23127.86		
(a) SOSTOTAL OF TEITHIZEG INDEPENDENT EXPENDITURES	23121.00		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
	2 14 2014		
Signature			

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 3 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
House Majority PAC	C C00495028	
Check if 24-hour report X 48-hour report New report Amends report filed on		
Full Name of Payee	Date of Public Distribution/Dissemination	
Murphy Vogel Askew Reilly LLC	02 12 2014	
Mailing Address 1199 N Fairfax St Ste 220	Amount	
City State Zip Code	12516.86	
Alexandria VA 22314-1437	Transaction ID : VN7GD9QYK04 Date of Disbursement or Obligation	
Purpose of Expenditure Media Production Costs - Estimate  Category/ Type	Mam / Dad / Yayayay	
Name of Federal Candidate Support O	office Sought: X House District: 26	
Joe Garcia Oppose	President Senate State: FL	
	oisbursement For:  Primary General O14 Other (specify)	
Full Name of Payee	Date of Public Distribution/Dissemination	
Murphy Vogel Askew Reilly LLC	02 14 2014	
Mailing Address 1199 N Fairfax St	Amount	
Ste 220	Amount	
City State Zip Code	16796.50	
Alexandria VA 22314-1437	Transaction ID : VN7GD9R1AM7  Date of Disbursement or Obligation	
Purpose of Expenditure Media Production Costs - Estimate  Category/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support C	Office Sought:     House District: 13	
David W. Jolly Oppose	President Senate State: FL	
	Disbursement For: Primary General  O14  Other (specify) ► Special General	
(a) SUBTOTAL of Itemized Independent Expenditures	29313.36	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7	
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Shannon Roche [Electronically Filed] Date	02 14 2014	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	OTILO	PAGE 3 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
House Majority PAC		C C00495028
Check if 24-hour report		
Full Name of Payee Waterfront Strategies		Date of Public Distribution/Dissemination
Mailing Address 3050 K St NW		02 12 2014 Amount
Ste 100		Amount
City State Z	Zip Code	79800.53
	20007-5108	Transaction ID : VN7GD9QV5J4  Date of Disbursement or Obligation
Purpose of Expenditure Television Advertising	Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate	X Support Offi	ce Sought: X House District: 26
Joe Garcia	Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	Dis 2317.39 201	bursement For:
Full Name of Payee		Date of Public Distribution/Dissemination
Waterfront Strategies		02 14 2014
Mailing Address 3050 K St NW		Amount
Ste 100		Autourt
City State 2	Zip Code	98708.09
	20007-5108	Transaction ID : VN7GD9QYNQ0 Date of Disbursement or Obligation
Purpose of Expenditure Television Advertising	Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate	Support Offi	ice Sought:   House District: 13
David W. Jolly	Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	494950.38 Dis 207	bursement For: Primary General  Other (specify)  Special General
(a) SUBTOTAL of Itemized Independent Expenditures		178508.62
(b) SUBTOTAL of Unitemized Independent Expenditures		
		7- 7- 7- 7-
(c) TOTAL Independent Expenditures	·····	230949.84
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Shannon Roche [Electronic		02 14 2014
Signature	_	